



# Rhode Island State Police

*Planning, Research and Accreditation Unit  
311 Danielson Pike, North Scituate, RI 02857-1907*



## Application for Internship Instructions

The Rhode Island State Police internship program provides an excellent opportunity for students to learn and serve through first-hand participation in law enforcement or related careers in criminal justice. We welcome applicants who have demonstrated academic excellence. Applicants will be required to have background investigation and records checks. Applicants who are minors are required to have their parents or legal guardian sign the consent form provided on Page 9 of this packet. Internship positions are based on a 10 week program and based on a semester schedule.

Please complete all sections of the application thoroughly. Although providing the information requested is voluntary, failure to provide complete answers may affect the review and consideration of your application. Your completed application will be carefully reviewed and considered. Should a position be available, you will be contacted by the Internship Coordinator to schedule an interview.

Please note that all internships are unpaid and subject to availability. Should a position become available you will be contacted. Your application must include all of the following in order to be considered:

- Application for Internship
- Authorization for Release of Information
- Agreement to Release, Defend, Hold Harmless and Indemnify
- Current Resume
- An unofficial transcript
- Letter of referral from your school
- A copy of a Photo ID

The application and all of the above requested materials must be submitted together. Failure to meet any of the above mentioned requirements may prevent the review of your application. Applicants should submit the completed application to:

**Internship Coordinator  
Rhode Island State Police  
Planning, Research and Accreditation Unit  
311 Danielson Pike  
North Scituate, RI 02857-1907**



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Awarding academic credit for an internship is at the discretion of your high school, college or university. However, we will assist you in providing appropriate information as requested by your school. Arrangements for credit should be made before you begin the internship. Internship hours will not exceed twelve hours per week and scheduled Monday through Friday, between the hours of 8 AM and 4 PM.

The Rhode Island State Police will sign off on weekly attendance forms submitted by the student. We do not notify educational institutions of absences through any other means. At the completion of the internship, the Rhode Island State Police will provide a basic evaluation of the student's performance which is found at the end of this packet.

Rhode Island State Police reserves all rights to cancel any internship position at any time.

## Authorization

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Please check this box if you would be interested in an internship with another division of the Rhode Island Department of Public Safety. If there are no internships available with the Rhode Island State Police during the timeframe specified on your application, by checking the box your application will be forwarded to the Internship Program Coordinator for the Department of Public Safety. The other Department agencies are:

- Division of Sheriffs
- Division of the State Fire Marshal
- Rhode Island Capitol Police
- Municipal Police Training Academy
- E 9-1-1 Uniform Emergency Telephone System
- Public Safety Grants Administration Office

The DPS Internship Program Coordinator will follow up with you directly if available openings are identified in any of the agencies.



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## Interview Instructions

### **Attire for Women:**

Attire includes conservative suits, business like dresses or separates, such as skirts, slacks, blouses, sweaters, sweater sets, and jackets. Footwear should be conservative; no sandals or flip-flops are allowed. In addition, no piercings (other than ears), visible tattoos or excessive or outrageous jewelry is to be worn. Hair-styles should be conservative and of a natural color. Always look professional.

### **Attire for Men:**

Attire includes conservative sport coat worn with dress trousers, business suits, dress shirts, and ties. Wear all-leather belts and dress shoes. In addition, no facial hair, piercings, visible tattoos or excessive or outrageous jewelry is to be worn. Hair should be short and well groomed and of a natural color. Always look professional.

### **Interview:**

Interviews for internship are conducted at Rhode Island State Police Headquarters at 311 Danielson Pike, North Scituate in Rhode Island. Navigate to the white two-story mansion, which is encompassed in a white picket fence. The mansion is to the far left of the Public Safety Complex. Enter at the front of the mansion which is between the two flags. Park at designated visitor parking and arrive ten (10) minutes before your scheduled interview in appropriate attire. Approximate interview time is 30 minutes. The mansion is open for interviews (the sign "Building Closed" does not apply for interviews).



Rhode Island State Police  
311 Danielson Pike  
North Scituate, RI  
White two-story mansion -  
Front Entrance



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## Application for Internship

### Applicant

Name:		Date of Birth:	
Address:		City:	
State:	Zip:	E-Mail:	Home Telephone:
Driver's License No.		State Issued:	Cell Telephone:

### Emergency Contact Person

Name:			
Address:		City:	
State:	Zip:	E-Mail:	Home Telephone:
Relationship:		Work Telephone:	Cell Telephone:

### Availability

**All internship positions are based on a 10 week program and based on a semester schedule.**

Dates you are available:	Beginning Date:	Ending Date:
Hours of availability:		
Monday Hours:		Thursday Hours:
Tuesday Hours:		Friday Hours:
Wednesday Hours:		

### Academic Background (list college/universities from which you are pursuing or have received a degree)

Current College/University/High School:

City:	State:	GPA:
Major/Area of Study (if applicable):		Rank:
Type of Degree Pursued:		Date Degree Expected:
Academic Level: <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate		
Faculty Advisor Name:		
Department:		Telephone:

<b>Military Record</b>	
<b>Have you ever served on active duty in the Armed Forces of the United States?</b>	
<b>Branch of Military Service:</b>	<b>Serial Number:</b>
<b>Date of Service:</b>	<b>Type of Discharge:</b>
<b>Where Discharged:</b>	<b>Do you have a Service Disability?</b>

<b>Citizenship</b>		
<b>Are you a U.S. Citizen?</b>	<b>Social Security #:</b>	
<b>If Naturalized, Date of Entry:</b>	<b>Place of Entry:</b>	
<b>Court:</b>	<b>Date:</b>	<b>Place:</b>

<b>Background Information</b>
<b>If you answer "YES" to any of the following questions attach an explanation to this application; include the date(s) and location(s) of conviction(s) and the disposition(s):</b>
<b>Have you ever been charged with a criminal offense?</b>
<b>Have you ever been convicted of a felony or a misdemeanor?</b>
<b>Have you ever pled nolo contendere or pled guilty to a crime which is a felony or a misdemeanor?</b>
<b>Have you ever had the adjudication of guilt withheld for a crime which is a felony or a misdemeanor?</b>

<b>List skills you possess that may be helpful to you as an intern:</b>

**What are your career objectives:**

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**Reasonable accommodations will be provided on request.**

Date \_\_\_\_\_



# Rhode Island State Police

*Detective Bureau*

*311 Danielson Pike, North Scituate, RI 02857-1907*



## Authorization for Release of Information

I, \_\_\_\_\_, hereby give the Rhode Island State Police and its agents the authority to conduct a comprehensive investigation of my background including, but not limited to, oral discussions with any person concerning my background. I also authorize a review and full disclosure of all records and other information concerning myself whether such records and other information are public, private, privileged or confidential. This includes records maintained by past and present employers, law enforcement, public utility companies, state and federal agencies including but not limited to the Division of Taxation, the Internal Revenue Service, and any Health Care facility which dispenses care and treatment for social, mental or emotional difficulties.

To the custodian of the records discussed herein, I hereby authorize you to release information to the bearer of this *Authorization for Release of Information*. I consider a copy of the *Authorization for Release of Information* to be as valid as the original even though a copy does not have my original signature.

I hereby release to the Rhode Island State Police and its agents and anyone who gives written or oral information about me to the Rhode Island State Police from any claims of liability or damages which may occur as a result of the background investigation. This release of liability also extends to my heirs, associations, assigns and representatives.

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Witness Signature*

\_\_\_\_\_  
*Date*



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## Agreement To Release, Defend, Hold Harmless And Indemnify

This agreement is entered into by and between the undersigned

\_\_\_\_\_ of \_\_\_\_\_  
(Applicant) (Address)

City/Town of \_\_\_\_\_, State of \_\_\_\_\_

and the State of Rhode Island Division of State Police (the "State").

In consideration of permission granted to me, the undersigned, by the State to participate in a program with the Rhode Island State Police during the month(s) of \_\_\_\_\_, 20\_\_\_\_, the undersigned hereby and forever releases and discharges the State, its agents, officials and employees from, and shall defend, hold harmless, and indemnify each and any of them from and against, any expenses, debts, claims, demands, damages, actions and causes of action whatsoever, including without limitation, any such resulting from personal injury or property damage which the undersigned may now or may hereafter have as a result of his/her participation in the volunteer program with the Rhode Island State Police during the month(s) of \_\_\_\_\_, 20\_\_\_\_.

IN WITNESS WHEREOF, I, the undersigned, declare full understanding of the terms of this Agreement and have executed this Agreement at the place, and day, and year appearing after my signature.

\_\_\_\_\_  
Signature Address Date

\_\_\_\_\_  
Witness Date



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## Agreement To Release, Defend, Hold Harmless And Indemnify

### To be completed by minors only

This agreement is entered into by and between the undersigned

\_\_\_\_\_ of \_\_\_\_\_  
(Name of parent or legal guardian) (Address)

City/Town of \_\_\_\_\_, State of \_\_\_\_\_

and the State of Rhode Island Division of State Police (the "State").

In consideration of \_\_\_\_\_ participating in an  
(Name of applicant)

internship program with the Rhode Island State Police during the months of

\_\_\_\_\_, 20\_\_\_\_\_, I the undersigned, for

myself, my heirs and assigns, do hereby and forever release and discharge the State, its agents, officials and employees from, and shall defend, hold harmless, and indemnify each and any of them from and against, any expenses, debts, claims, demands, damages, actions and causes of action whatsoever, including without limitation, any such resulting from personal injury or property damage which \_\_\_\_\_ (Name of Applicant) may now or may hereafter have as a result of this participation in the above referenced internship program with the Rhode Island State Police.

IN WITNESS WHEREOF, I, the undersigned, declare full understanding of the terms of this agreement and have executed this agreement at the place an day and year appearing after my signature.

\_\_\_\_\_  
Signature of parent or legal guardian

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date



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## INTERN PERFORMANCE APPRAISAL

### PART I

Name of Intern	
Assigned Bureau/Unit	
Rating Supervisor	
Period of Report	From:
	To:

### PART II

#### Rating Standards:

- **Exceeds Expectations (EE)** — Meets all expectations. Strives for excellence. Sometimes exceed requirements. Always follows through and does what is asked to do.
- **Meets Expectations (ME)** — Consistently competent performance for the factor and sometimes exceeds requirements.
- **Needs Improvement (NI)** — Total performance occasionally or periodically falls short of normal standards.

	EE	ME	NI
1. Is conscientious about work hours (i.e. shows up and leaves on time).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is dependable when given assignments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Follows agency rules and regulations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Uses good judgment and common sense in accomplishing assignments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Completes all tasks given in a thorough manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Seeks out assignments and takes initiative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Completes tasks promptly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Takes on responsibility and works with little supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Works well with clients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Works well with staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Works well when confronted with a stressful situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Is sensitive to ethnic and cultural differences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Expresses thoughts clearly through verbal communication.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Expresses thoughts clearly in writing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Completes work neatly and accurately.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, how would you rate this student's internship performance?			
17. Overall, how would you rate this student's potential for future employment in the field?			

### PART III

Comments: Rating Supervisor	
Signature (Rating Supervisor)	Date

Upon completion of the evaluation it is suggested that you review the results with the intern identifying both strengths and areas in need of improvement. It would be valuable if you convey your thoughts either in this evaluation or in person regarding the intern's potential for continued work in the field. The completed evaluation will be kept on file at the Rhode Island State Police, Planning, Research and Accreditation Unit.

The Rhode Island State Police will sign off on weekly attendance forms submitted by the student. We will not however, notify the educational institution of absences through any other means. At completion of the internship, the Rhode Island State Police will provide a basic evaluation of the student's performance.